

CALIFORNIA BIRTH COHORT 2000 RECORD FORMAT

FIELD NUMBER	RECORD POSITIONS	NUMBER OF BYTES	ALPHA / NUMERIC	FIELD NAME AND DESCRIPTION
* 1.	1-6	6	N	BIRTH STATE FILE NUMBER
* 2.	7-12	6	N	BIRTH LOCAL REGISTRAR'S NUMBER
* 3.	13-32	20	A	LAST NAME OF CHILD
* 4.	33-44	12	A	FIRST NAME OF CHILD
* 5.	45-56	12	A	MIDDLE NAME OF CHILD
6.	57	1	N	AMENDMENT TYPE
7.	58	1	N	SEX OF CHILD
8.	59-60	2	-	(BLANK)
9.	61	1	N	TYPE OF BIRTH
10.	62	1	N	BIRTH ORDER
11.	63-66	4	N	BIRTHWEIGHT (GRAMS)
12.	67-73	7	N	DATE OF BIRTH (CYMMDD)
13.	74-77	4	N	BIRTH MATERNITY HOSPITAL CODE
14.	78	1	-	(BLANK)
15.	79-80	2	A	BIRTH COUNTY/PLACE
16.	81-82	2	-	(BLANK)
*17.	83-97	15	A	BIRTH SURNAME OF MOTHER
18.	98-99	2	A	BIRTHPLACE OF MOTHER
19.	100-101	2	N	AGE OF MOTHER
20.	102-103	2	N	MOTHER'S YEARS OF EDUCATION
21.	104-105	2	N	RACE-ETHNICITY OF MOTHER (GENERATED)
22.	106	1	-	(BLANK)
23.	107-108	2	A	MOTHER'S PLACE OF RESIDENCE
24.	109-110	2	-	(BLANK)
25.	111	1	N	TYPE OF CERTIFIER OF BIRTH
26.	112	1	A	MARITAL STATUS OF MOTHER (REPORTED)-LB
27.	113-118	6	A	CENSUS TRACT OF MOTHER'S RESIDENCE
28.	119-120	2	N	AGE OF FATHER
29.	121-122	2	N	FATHER'S YEARS OF EDUCATION
30.	123-124	2	N	RACE-ETHNICITY OF FATHER (GENERATED)
31.	125	1	-	(BLANK)
32.	126-132	7	A	DATE OF CHILD'S DEATH (CYMMDD) – LB Only
33.	133-136	4	N	DATE OF BIRTH REGISTRATION (YYMM)
34.	137-142	6	A	DATE OF LAST MENSES (YYMMDD)
35.	143-145	3	A	LENGTH OF GESTATION (IN DAYS)
36.	146	1	A	MONTH PRENATAL CARE BEGAN
37.	147-148	2	N	NUMBER OF PRENATAL CARE VISITS
38.	149-152	4	-	(BLANK)
39.	153-154	2	N	LIVE BIRTHS NOW LIVING
40.	155-156	2	N	LIVE BIRTHS NOW DECEASED
41.	157-158	2	N	TOTAL CHILDREN BORN ALIVE
42.	159-160	2	N	TERMINATIONS BEFORE 20 WEEKS
43.	161-162	2	N	TERMINATIONS 20 WEEKS PLUS
44.	163-164	2	N	TOTAL CHILDREN EVER BORN
45.	165-168	4	A	DATE OF LAST LIVE BIRTH (YYMM)

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46.	169-172	4	-	(BLANK)
47.	173-176	4	A	DATE OF LAST TERMINATION (YYMM)
48.	177-182	6	N	CANCELLED BIRTH STATE FILE NUMBER (LB/FD)
49.	183-188	6	N	CANCELLED DEATH STATE FILE NUMBER
50.	189-192	4	-	(BLANK)
51.	193-224	32	N	COMPLICATION OF PREGNANCY
52.	225-242	18	N	COMPLICATION OF LABOR/DELIVERY
53.	243-262	20	N	ABNORMAL CONDITIONS
54.	263-272	10	-	(BLANK)
55.	273-276	4	N	HOUR OF BIRTH (HHMM)
*56.	277-284	8	A	MOTHER'S FIRST NAME
57.	285	1	N	HISPANIC ORIGIN CODE OF FATHER
58.	286	1	N	HISPANIC ORIGIN CODE OF MOTHER
59.	287-291	5	A	MOTHER'S RESIDENTIAL ZIP CODE
60.	292-293	2	N	STATE OF RESIDENCE OF MOTHER
61.	294-296	3	N	CENSUS PLACE MOTHER'S RESIDENCE (LB)
62.	297-304	8	-	(BLANK)
63.	305	1	N	TYPE OF EVENT
64.	306-307	2	N	YEAR OF EVENT
65.	308-309	2	N	BIRTH LOCAL REGISTRATION DISTRICT (LB/FD)
*66.	310-324	15	A	LAST NAME OF FATHER
67.	325-332	8	-	(BLANK)
68.	333-339	7	A	FATHER'S DATE OF BIRTH (CYMMDD)
69.	340-341	2	N	RACE-ETHNICITY OF FATHER (CODE 1)
70.	342-343	2	A	RACE-ETHNICITY OF FATHER (CODE 2)
71.	344-345	2	A	RACE-ETHNICITY OF FATHER (CODE 3)
72A.	346	1	N	MULTI-RACE CODE OF FATHER
72B.	347	1	-	(BLANK)
73.	348-354	7	A	MOTHER'S DATE OF BIRTH (CYMMDD)
74.	355-356	2	N	RACE-ETHNICITY OF MOTHER (CODE 1)
75.	357-358	2	N	RACE-ETHNICITY OF MOTHER (CODE 2)
76.	359-360	2	N	RACE-ETHNICITY OF MOTHER (CODE 3)
77A.	361	1	N	MULTI-RACE CODE OF MOTHER
77B.	362	1	N	MULTI-RACE OF DECEDENT
78.	363-365	3	A	METHOD OF DELIVERY THIS BIRTH
79.	366-367	2	N	PRINCIPAL SOURCE OF PAYMENT FOR PRENATAL CARE
80.	368-369	2	N	EXPECTED PRINCIPAL SOURCE OF PAYMENT FOR DELIVERY
81.	370	1	N	PLANNED BIRTHPLACE THIS BIRTH
82.	371-378	8	N	DATE OF DECEDENT'S DEATH (CYMMDD)
83.	379-381	3	N	AGE OF DECEDENT (CUU)
84.	382	1	N	DEATH REPORTED TO CORONER
85.	383	1	N	BIOPSY PERFORMED ON DECEDENT
86.	384	1	N	AUTOPSY PERFORMED ON DECEDENT
87.	385	1	N	OPERATION PERFORMED PRIOR TO DEATH
88.	386	1	N	TYPE OF FACILITY WHERE DECEDENT DIED

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89.	387	1	N	DEATH IN HOSPITAL
90.	388	1	N	TYPE OF CERTIFIER OF DEATH
91.	389-393	5	A	UNDERLYING CAUSE OF DEATH (ICD 10 TH REVISION)
92.	394-396	3	N	GROUP CAUSE OF DEATH
93.	397-399	3	N	INFANT GROUP CAUSE OF DEATH
94.	400	1	N	HISPANIC ORIGIN OF DECEDENT
95.	401-402	2	N	RACE/ETHNICITY OF DECEDENT (CODE #1)
96.	403-404	2	N	RACE/ETHNICITY OF DECEDENT (CODE #2)
97.	405-406	2	N	RACE/ETHNICITY OF DECEDENT (CODE #3)
98.	407-408	2	N	RACE/ETHNICITY OF DECEDENT (GENERATED)
99.	409-410	2	A	PLACE OF DECEDENT'S RESIDENCE
100.	411-412	2	N	PLACE WHERE DEATH OCCURRED
101.	413-414	2	N	DEATH LOCAL REGISTRATION DISTRICT
*102.	415-420	6	N	DEATH LOCAL REGISTRAR'S NUMBER
*103.	421-426	6	N	DEATH STATE FILE NUMBER

Note: Highlighted Items are new in 2000 or Death Items for 2000-2001.

* Data are suppressed with blanks when personal identifiers are not requested.

Source: California Department of Health Services, Vital Statistics Section, "2000 California Birth Tape File Documentation," "2000 California Death Tape File Documentation," "2001 California Death Tape File Documentation," and "2000 California Fetal Death Tape File Documentation." California Birth Cohort File Revision, February 2003.